

## SYMPTOMLESS HEMATURIA.\*

REPORT OF THREE CASES IN WHICH HEMORRHAGE CEASED AFTER CATHETERIZATION OF THE URETERS.

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IN reporting these cases I do not pretend to claim that ureteral catheterization has cured them, and only state the facts in each case. It is rather interesting to note that immediately following ureteral catheterization blood disappeared in these 3 cases, and up to the present time has not returned.

CASE I.—Male, 45, carpenter. He was first seen by me in November, 1905. His previous history was negative, no history of any trauma. Six months before I saw him he noticed blood in the urine that has continued unintermittingly. No frequency, pains or symptoms of any urinary irritation. There was a slight loss of weight but he did not appear anaemic. The urine passed was very bloody. Sp. Gr. 1020, acid reaction and a trace of albumin—the microscopical examination was negative except for blood and a few leucocytes.

Cystoscopic examination November 10, 1905. Bladder capacity, 300 c.c. Mucous membrane of bladder normal, blood seen flowing from the right ureter. Both ureters were catheterized, ureteral catheters passing to the kidney pelvis without obstruction. The urine collected from the right ureter showed blood and a few leucocytes, otherwise normal, that from the left ureter was perfectly normal. There were no more white cells present than could be accounted for by the amount of blood seen. Examination of urine 24 hours after ureteral catheterization showed clear urine apparently free from blood, but on microscopical examination a few red cells were noted. Forty-eight

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hours after ureteral catheterization the urine was clear and no blood cells could be found on microscopical examination. The blood has never recurred in the urine up to the present time, 20 months after ureteral catheterization.

CASE II.—This case was referred to me by Dr. Mason. Male, 53. Past history negative. One and a half months before I saw the patient his wife noticed that he was passing bloody urine, three days before this symptom was noted the patient was working on a roof supported by a rope tied around his waist. At the time I saw him he had never had any symptoms other than the blood in the urine. When examined I found him to be a well preserved man, slightly anaemic. On passing his urine it was noted that it contained a large amount of blood. The blood had continued without cessation for a month and a half. Cystoscopic examination revealed a normal bladder mucosa and showed bloody urine escaping from the right ureter. Catheterization of the two ureters showed bloody urine from the right side that contained no abnormal elements except the red blood cells; while that from the left side was perfectly normal. An examination of the mixed urines was negative except for the blood. The day following the ureteral catheterization the urine was perfectly free from blood. It is now three and one half years afterwards. There has never been any recurrence of blood in the urine and in all this time the patient has been in good health.

CASE III.—R.M., 56 years of age, bank cashier from Virginia. This patient was first seen by me in October, 1906. Previous history, pneumonia at 21, sick two months, recovered; no venereal diseases. During the same year that he had pneumonia his urine became bloody. At times the blood would almost disappear, but exposure, indigestion or exercise would cause a recurrence. There was no pain when bleeding would occur except when clots would be present in the urine. This was 35 years before he was seen by me. As a young man he consulted a number of prominent surgeons among the number being Dr. Nathan R. Smith of Baltimore, Dr. Hunter McGuire and others. He was advised against any operative procedure.

During the last 15 or 20 years the blood has been much greater in amount and much more constantly greater than during the early years of his illness. He has never had any pain in

the bladder or symptoms of vesical irritation. He has never complained of any symptoms other than that of blood in the urine for 35 years except he has had what he describes as attacks of lumbago. From what he says there is possibly some relation between the passage of clots and these attacks of lumbago which he describes. He says that the blood is always seen to be intimately mixed with the urine, but at times is more abundant in the last urine passed. The patient is an educated man and one I believe whose statements can be relied upon. He assured me that his urine had never been free from blood for 35 years and his present physician said it had been so to his personal knowledge for 17 years. At times the urine would be vermilion color, at other times it would vary between a port wine and almost inky blackness.

On examination it was seen that the patient was anaemic, emaciated and had the appearance of being a very ill man. On palpation of the kidneys no tumor could be felt and deep pressure elicited no more pain on one side than on the other. The other genito-urinary organs appeared normal. The urine passed by the patient was very bloody being the color of port wine and the last urine passed contained some small clots. Examination both chemically and microscopically of the urine was absolutely negative except for blood.

Cystoscopic examination on October 25, 1906, showed a normal bladder and very bloody urine escaping from the right ureter, both ureters were catheterized both catheters appearing to pass to the pelvis of the kidney without obstruction. Clear normal urine escaped from the left side while very bloody port wine colored urine escaped from the right side. Microscopical examination of the left urine was perfectly normal that from the right showed very numerous red cells and a few leucocytes. When I visited the patient at the Garfield Hospital 24 hours after ureteral catheterization he informed me that the bleeding had stopped. On examination the urine seemed to be clear and microscopical examination showed only a few red blood cells. I insisted on his having an X-ray picture taken, but he wished to go home first. As the bleeding has not recurred he has neglected to return to Washington. I have been in constant communica-

tion with him for the past twelve months. He has informed me that his health is better than it has been in years, he has gained weight, strength, and has no recurrence of the hemorrhage whatsoever.

NOTE.—Since this article went to press I have examined the patient referred to as Case 3. He has gained 26 pounds and appears in perfect health. He has had frequent microscopical examinations of his urine and at no time has any blood been noted. It is now 17 months since his ureters were catheterized.